



## **Request to Duplicate Building Plans**

In accordance with Section 19850 of the State of California's Health and Safety Code (HSC) and Section 18.05.070 of the Long Beach Municipal Code (LBMC), the person requesting to duplicate the maintained building plans shall submit the following documents:

### **1) Authorization to Duplicate Plans – Affidavit**

The requestor acknowledges and agrees to abide by the following provisions:

- a. The plans shall only be used for the maintenance, operation and use of the building;
- b. The drawings are instruments of professional service and are incomplete without the interpretation of the certified, licensed or registered professional of record; and,
- c. The licensed architect/engineer who signs plans, specifications, reports, or documents shall not be responsible for damage caused by subsequent changes to, or use of, those plans, specifications, reports, or documents.

### **2) Authorization to Duplicate Plans – Owner**

Obtain authorization from the original or current owner of the building or, if the building is part of a common interest development, from the Board of Directors or other governing body of the association established to manage the common interest development.

### **3) Authorization to Duplicate Plans – Professional of Record**

Obtain authorization from:

- a. The certified, licensed or registered professional or his or her successor, if any, who signed the original documents\*;
- b. A proper court of law; or
- c. Any State agency.

\*Attempt should be made to the last known address on file with the California Department of Consumer Affairs, License Verification at [http://www.cab.ca.gov/consumers/license\\_verification.shtml](http://www.cab.ca.gov/consumers/license_verification.shtml)

Upon completion of the above forms, please return them to the Long Beach Development Permit Center. At that time, determination of the exact cost will be determined.

Please contact the Long Beach Development Permit Center at (562) 570-5237 should you have any questions.

To request this information in an alternative format or to request a reasonable accommodation, please contact the Development Services Department at longbeach.gov/lbds and 562.570.3807. A minimum of three business days is requested to ensure availability; attempts will be made to accommodate requests with shorter notice.

**Authorization to Duplicate Affidavit**

|   |                        |                            |        |                |         |             |       |            |                |              |                        |
|---|------------------------|----------------------------|--------|----------------|---------|-------------|-------|------------|----------------|--------------|------------------------|
| <b>PLEASE PRINT CLEARLY AND COMPLETE IN ITS ENTIRETY</b>  |                        |                            |        |                |         |             |       |            |                |              |                        |
| Property Address:   |                        | Project No:<br><b>BFFS</b> |        |                |         |             |       |            |                |              |                        |
| <b>LEGAL DESCRIPTION</b>  |                        |                            |        |                |         |             |       |            |                |              |                        |
| <b>LOT</b>  | <b>BLOCK</b>           | <b>TRACT</b>               |        |                |         |             |       |            |                |              |                        |
| Applicant's Name:   |                        |                            |        |                |         |             |       |            |                |              |                        |
| Address:  | City, State:           | Zip:                       | Phone: |                |         |             |       |            |                |              |                        |
| <p>I certify that I am the person requesting to duplicate the official copy of the maintained building plans for the building or structure for real property located in the City of Long Beach, State of California, as stated above.</p> <p>I further acknowledge and agree to abide by the following provisions as set forth in Section 19851 of the Health and Safety Code:</p> <ol style="list-style-type: none"><li>1. The plans shall be used only for the maintenance, operation and use of the building.</li><li>2. The drawings are instruments of professional service and are incomplete without the interpretation of the certified, licensed or registered professional of record.</li><li>3. That Subdivision (a) of Section 5536.25 and Subdivision (b) of Section 6735 of the Business and Professions Code states that a licensed architect/engineer who signs plans, specifications, reports, or documents shall not be responsible for damage caused by subsequent changes to, or use of, those plans, specifications, reports, or documents where the subsequent changes or uses, including changes or uses made by state or local governmental agencies, are not authorized or approved by the licensed architect/engineer who originally signed the plans, specifications, reports, or documents, provided that the architectural/engineering service rendered by the architect/engineer who signed the plans, specifications, reports, or documents was not also a proximate cause of the damage.</li></ol> <p>I understand the cost of duplication shall be:</p> <table style="width: 100%; margin-top: 10px;"><tr><td style="width: 60%;">Processing Fee</td><td style="text-align: right;">\$94.00</td></tr><tr><td>Flash Drive</td><td style="text-align: right;">11.63</td></tr><tr><td>Surcharges</td><td style="text-align: right;"><u>7.18---</u></td></tr><tr><td><b>Total</b></td><td style="text-align: right;"><b><u>\$112.81</u></b></td></tr></table> <p>The requested building plans should be available for pickup in approximately 48-72 hours from the date of payment. We will contact you once they are available.</p> |                        |                            |        | Processing Fee | \$94.00 | Flash Drive | 11.63 | Surcharges | <u>7.18---</u> | <b>Total</b> | <b><u>\$112.81</u></b> |
| Processing Fee  | \$94.00                |                            |        |                |         |             |       |            |                |              |                        |
| Flash Drive   | 11.63                  |                            |        |                |         |             |       |            |                |              |                        |
| Surcharges  | <u>7.18---</u>         |                            |        |                |         |             |       |            |                |              |                        |
| <b>Total</b>  | <b><u>\$112.81</u></b> |                            |        |                |         |             |       |            |                |              |                        |
| I CERTIFY THAT I HAVE READ THE ABOVE AND THAT THE CONDITIONS ARE TRUE.  |                        |                            |        |                |         |             |       |            |                |              |                        |
| Signature   |                        |                            | Date   |                |         |             |       |            |                |              |                        |
| <b>Note: Notary acknowledgements must be attached to this document or accompanied by other method of identification or seal that verifies the authenticity of the signature(s).</b>   |                        |                            |        |                |         |             |       |            |                |              |                        |



## PLAN DUPLICATION ORDER

| MICOFICHE  |         |
|------------|---------|
| SLIP #     | IMAGE # |
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| LASERFICHE |         |
| PAGE #     |         |

### Microfiche Legend:

Image # →

Street Name
Street #
Slip #

1

2

3

4

5

6

To request this information in an alternative format or to request a reasonable accommodation, please contact the Development Services Department at longbeach.gov/lbds and 562.570.3807. A minimum of three business days is requested to ensure availability; attempts will be made to accommodate requests with shorter notice.



## Authorization to Duplicate Plans - Owner

The undersigned hereby certify that (I am) (we are) the (owner) (board of directors or governing body of the association established to manage the common interest development) for the building or structure on real property located in the City of Long Beach, State of California that is hereinafter legally described (as follows) (on the attached exhibit(s) \_\_\_\_\_):

### LEGAL DESCRIPTION:

LOT \_\_\_\_\_ BLOCK \_\_\_\_\_ TRACT \_\_\_\_\_

LOT \_\_\_\_\_ BLOCK \_\_\_\_\_ TRACT \_\_\_\_\_

as recorded in BOOK \_\_\_\_\_ PAGE \_\_\_\_\_, Records of Los Angeles

County. This property is located and known as the following:

ADDRESS: \_\_\_\_\_

(I) (We) do hereby authorize the City of Long Beach to duplicate or permit to be duplicated, the official copy of the plans for the above address.

Signed on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Print Name of Owner

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Signature of Board of Director

\_\_\_\_\_  
Print Name of Board of Director

\_\_\_\_\_  
Telephone

*Note: Notary acknowledgements must be attached to this document or accompanied by other method of identification or seal that verifies the authenticity of the signature(s).*

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## Authorization to Duplicate Plans - Professional

The undersigned hereby certify that I am the (certified) (licensed) (registered) professional of record, or (his) (her) successor, who signed the original plans for the building or structure on real property located in the City of Long Beach, State of California that is hereinafter legally described (as follows) (on the attached exhibit(s) \_\_\_\_\_):

### LEGAL DESCRIPTION:

LOT \_\_\_\_\_ BLOCK \_\_\_\_\_ TRACT \_\_\_\_\_

LOT \_\_\_\_\_ BLOCK \_\_\_\_\_ TRACT \_\_\_\_\_

as recorded in BOOK \_\_\_\_\_ PAGE \_\_\_\_\_, Records of Los Angeles

County. This property is located and known as the following:

ADDRESS: \_\_\_\_\_

I do hereby authorize the City of Long Beach to duplicate or permit to be duplicated, the official copy of the plans for the above address subject to the following conditions:

1. The copy of plans shall be used only for the maintenance, operation and use of the building.
2. Pursuant to Subdivision (a) of Section 5536.25 and Subdivision (b) of Section 6735 of the Business and Professions Code, that I, a licensed architect/engineer, who signs plans, specifications, reports, or documents shall not be responsible for damage caused by subsequent changes to, or use of, those plans, specifications, reports, or documents where the subsequent changes or uses, including changes or uses made by state or local governmental agencies, are not authorized or approved by me, the licensed architect/engineer, who originally signed the plans, specifications, reports, or documents, provided that the architectural/engineering service rendered by me, the architect/engineer who signed the plans, specifications, reports, or documents was not also a proximate cause of the damage.

Signed on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Signature of Professional

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Lic #

\_\_\_\_\_  
Telephone

*Note: Notary acknowledgements must be attached to this document or accompanied by other method of identification or seal that verifies the authenticity of the signature(s).*

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